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Fax: 610-530-8200**FAX FILING IN U.S. PATENT & TRADEMARK OFFICE**DATE: August 28 2006

TIME: _____

TO:	Mail Stop Amendment	FAX NO.:	571-273-8300
FROM:	Kenneth N. Nigon	ADMIN. ASST.:	Patricia C. Boccella
APPLN. NO.:	10/524,965	ATTY. DOCKET NO.:	MATI-218US
TITLE OF APPLN.: METHOD, SYSTEM AND APPARATUS FOR GENERATING STRUCTURED DOCUMENTS FILES			
FILING DATE:	October 14, 2005	ART UNIT:	2624
FIRST INVENTOR: Jinhong Katherine Guo			
TITLE OF DOCUMENT (and List of Attachments):		Transmittal, Fee Transmittal, Amendment, PTO-2038	

*Total Number of Pages 21 (including this form)***COMMENTS****CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION**

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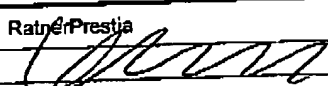
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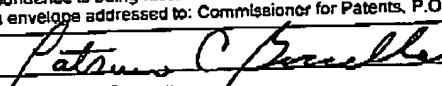
PTO/SB/21 (09-04) (AW 10/2004)
Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/524,965
	Filing Date	October 14, 2005
	First Named Inventor	Jinhong Katherine Guo
	Art Unit	2824
	Examiner Name	AAron W. Carter
	Attorney Docket No.	MAT-218US
Total Number of Pages in This Submission 20		

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ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-2038; PTO Facsimile Cover Sheet
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name	RatnerPrestia		
Signature			
Printed Name	Kenneth N. Nigon		
Date	August 28, 2006	Registration No.	31,549

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date shown below:			
Signature			Date
Typed or Printed Name	Patricia C. Boccia	Date	August 28, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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PTO/SB/17 (12-04v2) (AW 1/2005)

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Effective on 12/08/04.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL
For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
50.00**Complete if Known**

Application Number	10/524,965
Filing Date	October 14, 2005
First Named Inventor	Jinhong Katherine Guo
Examiner Name	Aaron W. Carter
Art Unit	2624
Attorney Docket No.	MAT1-218US

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CENTRAL FAX CENTER****AUG 28 2006****METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues) _____
 Each independent claim over 3 (including Reissues) _____
 Multiple dependent claims _____

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
350	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
21	1	50	50			
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
5	0					
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100				

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____
 Other (e.g., late filing surcharge): _____

Complete (if applicable)

SUBMITTED BY		Complete (if applicable)	
Signature		Registration No. Attorney/Agent	31,549
Name (Print/Type)	Kenneth N. Nigon	Telephone	610-407-0700
		Date	August 28, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/M7 (12-04v2) (AW 1/2005)

Approved for use through 7/31/2006. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/04.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 50.00

Complete if Known

Application Number 10/524,965
Filing Date October 14, 2005
First Named Inventor Jinhong Katherine Guo
Examiner Name Aaron W. Carter
Art Unit 2624
Attorney Docket No. MATI-218US

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METHOD OF PAYMENT (check all that apply)

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☒ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	180	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
350	180

Multiple dependent claims					Multiple Dependent Claims	
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
21	- 20 or HP =	1	50	50		
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)		
5	- 5 or HP =	0				
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
—	—	—	—	—
—	—	—	—	—

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Complete (if applicable)

SUBMITTED BY
Signature [Signature] Registration No. Attorney/Agent S1,549 Telephone 610-407-0700
Name (Print/Type) Korneth N. Nigon Date August 28, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Appln. No.: 10/524,965
Amendment Dated August 28, 2006
Reply to Office Action of June 13, 2006

MATI-218US

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/524,965
Applicant: Jinhong Katherine Guo
Filed: October 14, 2005
Title: METHOD, SYSTEM AND APPARATUS FOR GENERATING STRUCTURED
DOCUMENT FILES
TC/A.U.: 2624
Examiner: Aaron W. Carter
Confirmation No.: 3584
Docket No.: MATI-218US

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated June 13, 2006 please amend the above-identified application as follows:

- ☒ **Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.
- ☐ **Amendments to the Drawings** begin on page _____ of this paper and include an attached replacement sheet(s).
- ☒ **Amendments to the Abstract** are on page 8 of this paper. A clean version of the Abstract is on page 16 of this paper.
- ☒ **Remarks/Arguments** begin on page 9 of this paper.

08/29/2006 TL0111 00000036 10524965

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50.00 OP